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JACOBS ENGINEERING GROUP INC /DE/ Form 4 November 23, 2015

FORM	-	OMB APPROVAL									
	OMB Number:	3235-0287 January 31,									
Check this if no longe	ar.	ox STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
subject to Section 16 Form 4 or	5 I A I ENIF 5.			Estimated a burden hou response	irs per						
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Responses)											
1. Name and Ad HAGEN TE	ldress of Reporting Pe RENCE D	Symbol	Name and			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		JACOB INC /DI	s engin E/ [Jec]	EERING	GR	OUP					
(Last) 155 NORTH	(First) (Mid	ddle) 3. Date of (Month/D 11/19/20	-	insaction			Director 10% Owner Officer (give title Other (specify below) President, A&T				
	(Street)		ndment, Dat th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PASADENA	More than One Re	eporting									
(City)	(State) (Z	ip) Tabl e	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securit onAcquired Disposed (Instr. 3,	(A) of of (D 4 and (A) or)) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	11/19/2015		Code V A	Amount 5,850 (1)	(D) A	Price \$ 0	20,506	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative2.3. Transacti (Month/Day or ExerciseSecurity (Instr. 3)or Exercise Price of Derivative Security			3A. Deemed Execution Date, any (Month/Day/Ye	, if	4. Transact Code (Instr. 8)	5. Number of ctiorDerivative Securities 3) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ve s l (A) sed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
						Code V	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 42.74	11/19/2	2015			А		19,285 (2)		11/19/2016	11/19/2025	Common Stock	19,285 (2)
Reporting Owners													
Reporting Owner Name / Address		Relationships											
		Directo	r 10% Owner	Of	ficer			Other					
HAGEN TERENCE D 155 NORTH LAKE AVE PASADENA, CA 91101			President, A&T										
Signa	tures												
/S/ FRANKLIN D. DENIS		11/20/	/2015										

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Represents the receipt of restricted stock pursuant to the Company's 1999 Stock Incentive Plan. The restricted stock vests in four equal(1) annual installments beginning on the grant date. The terms of the award restrict the Reporting Person's ability to sell or otherwise dispose of the stock prior to the expiration of the restriction period.

(2) Represents the receipt of stock option pursuant to the Company's 1999 Stock Incentive Plan. The option vests in four equal annual installments beginning on the grant date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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